Project Case No.



PUGET SOUND CLEAN AIR AGENCY

110 Union Street, Ste. 500 Seattle, WA 98101-2038 (206) 689-4090 fax (206) 689-4073 www.pscleanair.org

QUARTERLY REPORT

Date Received:

Agency Use Only

1st QTR DUE APRIL 15 – 2nd QTR DUE JULY 15 – 3rd QTR DUE OCTOBER 15 – 4th QTR DUE JANUARY 15

Property	The Bo	peing Compa	Work Schedule: M T W Th F Sa Su								
Owner:	Owner: Hours: 06:00 to 14:30										
Mailing Address: P.O. Box 3707, 12-AP Contact Person: Bill Whelan											
City: Seattle St			State: WA Zip: 98124		Phone No.: 206-655-8497						
City: 50	attic		State: WA	Zip; 70121	Phone No.: 200-033-0477						
IMPORTANT: DO NOT INCLUDE ANY OTHER ASBESTOS PROJECTS FILED UNDER SEPARATE NOTIFICATION FORMS. THE QUARTERLY REPORT SHALL ONLY APPLY TO PROJECTS WHERE THE SUM TOTAL OF ALL THE ASBESTOS REMOVALS FROM EACH STRUCTURE, VESSEL OR BUILDING IN A CALENDAR YEAR IS LESS THAN 260 LINEAR FEET AND 160 SQUARE FEET.											
ASBESTOS REMOVAL PROJECTS UNDERTAKEN DURING THE 2nd QUARTER FOR CALENDAR YEAR 20 <u>06</u>											
FACILITY NAME: Boeing Auburn/Fredrickson Division Property TELEPHONE: 206-655-8497											
PROJECT DATES JOB SITE A OR LOC Specify Name of I		ATION	ASBESTOS CONTRACTOR OR EMPLOYEE NAMES	CERT#	CERT # QUANTITY REMO In Linear or Square						
Start	Complete					Quarter	Year Total				
4/24/06	4/24/06	Auburn Site	1	David Mathison	2006018826A	1 SF					
1/2 1/00		Facility Bldg No. 17-0	2000	Kenall Lysene	2007019185A						
		Bldg No. 17-0 Address or Location	<u>_</u>	3.							
		700 15th Ave. SV	l l	4							
		City Auburn									
METHOD	OF REMO	VAL (describe): (Glove bag removal of I	PACM gasket on pipe flange.							
		·									
-											
				ea, Pre-abatement air sampl		ground, glove	bag,				
wet metho	ds, persona	l and excursion air	sampling, disposal	and clearance air sampling							
				We as	* Continue on N	_					
				NEXT QUARTER: We as							
come up when contractors encounter PACMs/ACMs and need support in abating the area they plan to impact. We also anticipate											
typical tears and damage to ACMs that require our cleanup and/or abatement.											
I do hereby certify that the information contained in this Quarterly Report and supplemental data described herein is to the best of my knowledge, accurate and complete. Agency Use Only											
MM Willey For, David Levenson T				Boeing Company	7/10/2006						
Signature				Representing	Date	Revie	wed By				

QUARTERLY REPORT (Continued)

ASBESTOS REMOVAL PROJECTS UNDERTAKEN DURING THE 2nd QUARTER FOR CALENDAR YEAR 2006

PROPERTY OWNER: The Boeing Company Page _2 of _2										
PROJECT DATES		JOB SITE ADDRESS OR LOCATION Specify Name of Bldg., Vessel, etc.	ASBESTOS CONTRACTOR OR EMPLOYEE NAMES	CERT #	QUANTITY REMOVED In Linear or Square Feet					
Start Complete		Specify Name of Bidg., Vesser, etc.			Quarter	Year Total				
5/13/06	5/13/06	Auburn Site	1. David Matheson	2007018826A	15 SF					
5/20/06	5/20/06	Facility Dida No. 17 006	2. Kendall Lysene	2007019185A	15 SF					
5/27/06	5/27/06	Bldg No. 17-006 Address or Location	3 Richard Duckworth	2006022761A	15 SF					
3/2//00	3/2//00	700 15th Ave. SW	4							
		City Auburn								
METHOD OF REMOVAL (describe): Outside work, demarcate work area. Cut wet transite waste pipe in excavation with chain pipe cutter. Wrap ACM Transite pipe sections in 2+ layers of 6 mil poly, label and properly dispose. Same routine for 3 consecutive Saturdays.										
COMPLIANCE PROCEDURES (describe): Demarcation, wet methods, proper PPE, proper disposal of ACM waste.										
		T			I					
PROJECT DATES		JOB SITE ADDRESS OR LOCATION Specify Name of Bldg., Vessel, etc.	ASBESTOS CONTRACTOR OR EMPLOYEE NAMES	CERT #	QUANTITY In Linear or					
Start	Complete	Specify Ivanie of Blag., Vesser, etc.			Quarter	Year Total				
5/27/06	5/27/06	Auburn Site	1. David Mathison	2007018826A	1 SF					
		Facility Bldg No. 17-006	2. Rick Duckworth	2007022761A						
		Address or Location	3							
		700 15th Ave. SW	4							
		City Auburn								
METHOD (OF REMOVA	AL (describe): Glove bag removal of PA	ACM gasket on pipe flange.							
COMPLIAN	ICE PROCE	DURES (describe): Demarcated area, I	Pre-abatement air sampling, 6-mil	poly on ground, gl	ove bag,					
wet methods	s, personal a	nd excursion air sampling, disposal and	clearance air sampling.							
PROJECT DATES		JOB SITE ADDRESS OR LOCATION	ASBESTOS CONTRACTOR OR EMPLOYEE NAMES	CERT #	QUANTITY REMOVED In Linear or Square Feet					
Start	Complete	Specify Name of Bldg., Vessel, etc.			Ouarter	Year Total				
		Auburn Site	1		Quarter	Tear rour				
		Facility	2							
		Bldg No. Address or Location	3							
		700 15th Ave. SW	4							
		City Auburn								
METHOD (OF REMOVA	AL (describe):								
COMPLIAN	ICE PROCE	EDURES (describe):								

^{*} Attach Continuation Page for Additional Projects